

MENTEE APPLICATION

Lansing Area

Return by Fax to (517) 373-7123

Return by Email to:

Williamst8@michigan.gov

**October 28, 2015**

**ARE YOU AN ENERGETIC AND ENTHUSIASTIC STUDENT OR JOB SEEKER
WITH A DISABILITY LOOKING FOR A WORKPLACE MENTOR?**

If so, taking part in Disability Mentoring Day is right for you! DMD enables students and job seekers to spend part of a day job shadowing professionals here at the Michigan Department of Health and Human Services in Lansing. It is an opportunity to underscore the connection between school and work, evaluate personal goals, target career skills for improvement, explore possible career paths, and develop lasting mentor relationships. It all begins with this application, so fill it out, send it in, and spread the word! Deadline: All applications MUST be received by October 12, 2015.

SECTION I: GENERAL INFORMATION

Last Name: _____ First Name: _____

Date: _____ Male _____ Female _____ Date of Birth: _____

Address: _____

City: _____ Zip: _____ Phone: _____

Email: _____

Name of Disability (Impairment): _____

This is for informational and preparation purposes only. The mentor will not be informed of the mentees specific disability.

Emergency Contact:

Last Name: _____ First Name: _____

Phone: _____ Email: _____

SECTION II: EDUCATIONAL SUMMARY

Please check one of the following:

☐ High school student, attending _____ Grade _____☐ College/graduate student, attending _____ Year _____☐ Job seeker, not currently in school

Major or area of interest _____

Highest level of education attained (Check One):

☐ Some High School ☐ College Degree(s): _____
☐ High School Diploma ☐ Post-Graduate Degree(s): _____
☐ Vocational License _____

SECTION III: SCHOOL OR PROFESSIONAL CONTACT
(Teacher, Counselor, Professor, or Service Provider)

Last Name: _____ First Name: _____
Title: _____
Address: _____
City: _____ Zip: _____ E-mail: _____
Work: (____) _____ - _____ Cell: (____) _____ - _____

SECTION IV: PLACEMENT PREFERENCES

Below, using the informational worksheet (attached with the application) as a guide, please select up to three or more career choices and place in rank order.

<input type="checkbox"/> Population Health and Community Services	<input type="checkbox"/> Medical Services Administration
<input type="checkbox"/> Behavioral Health & Developmental Disabilities	<input type="checkbox"/> Aging Adult Services Agency
<input type="checkbox"/> Michigan Children's Services	<input type="checkbox"/> Field Operation
<input type="checkbox"/> Legal Affairs Administration	<input type="checkbox"/> Office of Recipient Rights

SECTION V: REASONABLE ACCOMMODATION REQUESTS

Please check if applicable:

<input type="checkbox"/> Braille	<input type="checkbox"/> Sign Language Interpreter
<input type="checkbox"/> Large print	<input type="checkbox"/> Dietary needs _____
<input type="checkbox"/> Wheelchair access	<input type="checkbox"/> Other _____

SECTION VI: GOALS, INTERESTS AND HOBBIES (OPTIONAL)

On separate sheets of paper, briefly answer the following questions. Though optional, we strongly encourage you to take advantage of this opportunity to provide more information, since this will help event organizers with the Mentor/Mentee matching process. Also feel free to include a resume.

What is your ultimate and/or long-term career goal? Describe your major and/or educational interests. Beyond high school, from what types of schooling have you attended? Describe your paid and/or unpaid work experience (if any). Include extracurricular activities, internships, and community service work. Describe the job-related skills that you have (if any). If not, what skills do you hope to gain?

SECTION VII: TRANSPORTATION

PRELIMINARY TRANSPORTATION PERMISSION

(PLEASE HAVE YOUR PARENT/GUARDIAN SIGN BELOW IF UNDER THE AGE OF 18)

____ I understand that I am responsible for making transportation arrangements. I further understand that, employers may escort mentees to job shadowing work sites via personal vehicle, state vehicle or walk to the job shadowing worksites unless the otherwise indicated by mentee. In the event the mentee wants to transport themselves to the work site, please inform the program coordinator in advance.

____ I will provide transportation for my son/daughter to and from the mentoring site on October 28th, 2015. I will also transport him/her from the plenary to the particular mentoring organization and then back to the afternoon plenary event in accordance with arrangements individually made with that organization in advance.

Signature

Date

*You will be notified in writing by October 17, 2015, if you will participate in the Disability Mentoring Day along with further instructions.

Please contact Toya Williams, MDHHS-EEO Officer, 517-335-4276, williamst8@michigan.gov, if you have any questions.

Michigan Department of Health and Human Services

CHILD WELFARE PROGRAMS

The Michigan Department of Human Services (DHS) is the state agency responsible for child welfare programming. There are five primary programs responsible for delivery of child welfare services.

Prevention/Family Preservation:

Preventive Services for Families (PSF) is designed to preserve and strengthen family functioning in order to prevent child abuse and neglect. The department's goal is to assist families to recognize their potential to improve family functioning. The program builds on the family's strengths to develop a plan with the family and teach them the needed skills to strengthen their family on their own. PSF is intended to help families who want help and or have been identified at risk for child abuse/neglect, but where actual abuse/neglect is **not** presently occurring. Early intervention in family problems related to abuse and neglect will help to improve family functioning, thereby resulting in fewer complaints made to children's protective services (CPS) and allowing children to remain in their homes. Participation by a family in PSF is voluntary. A family can choose to **not** receive PSF services.

Children's Protective Services:

The Children's Protective Services (CPS) program is responsible for investigating allegations of abuse and neglect. The Michigan Child Protection Law provides the framework for what CPS must do. CPS program responsibility includes the three primary functions of intake, field investigation, and service provision and intervention.

- Intake begins when a complaint alleging child abuse/neglect is received by the department, and is completed when a determination is made to: transfer the complaint to another jurisdiction for investigation of the complaint (for example, law enforcement, American Indian Tribal Unit, another state, etc.); assign for field investigation; reject the complaint.
- Field investigation is the process of gathering and evaluating information in order to assess the current safety and future risk of harm to a child and to reach a disposition regarding the complaint allegations.
- Service provision and intervention includes the use of structured decision-making tools to help determine the level of intervention needed and which, if any, services will be provided to the family.

Foster Care:

Foster care identifies and places children in safe homes when they cannot remain with their families because of safety concerns. Foster care assesses families for needs and strengths and coordinates services for those children and families that are intended to facilitate positive outcomes. Foster families provide these children with the consistency and support

they need to grow. Our main goal is to return children back to their homes when it is safe. If a return home is not possible, adoptive families are needed.

Adoption:

The primary focus of Michigan's adoption program is the adoptive placement of state and permanent court wards. In appropriate cases, local Department of Human Services (DHS) offices and private child placing agencies must develop a dual permanency plan for a child as early in the case as possible. This process, known as "concurrent planning," requires foster care staff to provide appropriate reunification services and also plan for a permanent placement if reunification efforts fail.

Juvenile Justice:

The Michigan Juvenile Justice system focuses on building safer Michigan communities and assisting youth to become healthy and productive citizens through proactive delinquency prevention, efficient law enforcement, effective rehabilitative treatment, statewide data collection and data sharing and comprehensive community reintegration and support services. The DHS Bureau of Juvenile Justice provides support for juvenile offenders and promotes safe communities by focusing on early intervention, diversion and prevention at the community level; effective community programming; continuous quality improvement (CQI), data collection and analysis; complete and consistent continuum of available evidenced-based services and treatment; and evidence-based principles/outcome driven funding through the child care fund.

Aging and Adult Services Agency

The Aging & Adult Services Agency (AASA) coordinates all services for Michigan's aging and adult population so that residents can receive the services they need to maintain their independence, and live a healthier and higher quality life.

Office of Recipient Rights

The MDHHS- Office of Recipient Rights' mission is to "protect and promote the constitutional and statutory rights of recipients of public mental health services and empower recipients to fully exercise these rights." ORR staff, through the Community Rights Unit, the Field Unit, Information and Referral, and the Training and Education Unit, work to provide rights protection to recipients of public mental health services. The protected rights include those provided in the Michigan Mental Health Code, as well as constitutional and statutory rights, including the Americans with Disabilities Act.

Population Health and Community Services

Population Health and Community Services protects and improves the health of Michigan individuals, families, communities, and populations. The Population Health and Community Services Administration is responsible for many public health programs, including communicable disease surveillance and outbreak investigation; control and prevention of chronic diseases, including cancer, cardiovascular disease, diabetes, and injuries; health statistics compilation and dissemination; HIV/AIDS and sexually transmitted disease prevention and care; immunizations; lead abatement; newborn screenings; and vital records collection and maintenance. The administration coordinates this work through contracts with local public health departments that serve all the jurisdictions in Michigan.

The Bureau of Emergency, Trauma, and Preparedness serves to better protect the health and well-being of Michigan residents through the administration and continuous improvement of emergency medical services, trauma system, as well as all-hazards preparedness planning and response. The Bureau of Family, Maternal, and Child Health serves Michigan residents through the Women, Infants, and Children (WIC) program, Family and Community Health initiatives, and Children's Special Health Care Services Plan programming. Population Health and Community Services also includes the Bureau of Laboratories, which manages one of the nation's leading public health laboratories.

Legal Affairs Administration

The Legal Affairs Administration is committed to providing competent expert guidance and support to MDHHS leadership and staff within the mandate of the Michigan Constitution and applicable state and federal law.

Functions/Responsibilities

- Assist the Department's staff in carrying out responsibilities in accordance with applicable laws
- Provide legal research and input to Department program staff
- Ensure compliance with the Freedom of Information Act
- Oversee and coordinate rulemaking in accordance with the Administrative Procedures Act
- Direct and manage compliance with the HIPAA Privacy Regulations
- Assist the Department in administrative hearings involving Medicaid providers and beneficiaries
- Respond to subpoenas served on the Department or its employees

- Coordinate the Department's administrative hearings, litigation, and requests for legal advice with the Department of Attorney General
- Coordinate online pharmacy complaints with the Department of Attorney General
- Review and evaluate trusts and annuities for assistance determinations
- Assist the Department in handling client civil rights complaints
- Assist Department staff in matters involving contracts, bankruptcy, and confidentiality issues
- Oversee the protection of human subjects involved in Department supported research

Field Operations Administration

The Field Operations Administration is broadly responsible for the overall case management and administration of the Department of Human Services' (DHS') programs to clients across the state. Field Operations staff provides services to all eligible Michigan citizens.

The Field Operations Administration is responsible for policy and/or program development for the following public benefits programs: Medicaid Program (MA), Food Assistance Program (FAP), Family Independence Program (FIP), State Emergency Relief (SER), Low-Income Home Energy Assistance Program (LIHEAP), the department's employment and training efforts and programs for special populations such as Pathways to Potential. These efforts also include the provision of program and policy liaison and support for the DHS field offices.

Medical Services Administration

The Medical Services Administration administers the Medicaid program, providing health care services to eligible Michigan residents. Those eligible for Medicaid include families enrolled in the Family Independence Program (FIP), other low-income families (non-FIP), Supplemental Security Income (SSI) recipients, pregnant women, children, elderly, disabled, blind, and the medically needy, who except for income, would qualify for regular Medicaid. Effective April 1, 2014, the State of Michigan implemented the Healthy Michigan Plan as authorized under the Patient Protection and Affordable Care Act and Michigan Public Act 107 of 2013. Medicaid covered services include hospital, physician, pharmacy, laboratory, behavioral health, durable medical equipment, dental, ambulance, hearing aids, speech/physical/occupational therapy and vision, as well as a continuum of long term care supports and services including Home Help, the MI Choice Waiver, Programs for All Inclusive Care for the Elderly (PACE) and nursing home care. Medicaid also pays the Medicare premiums, deductibles, and coinsurance for Qualified Medicare Beneficiaries; Medicare Part B premiums only for Specified Low Income

Beneficiaries; and the additional cost of adding home health services for Qualified Individuals (QIs).

The Medical Services Administration also administers other health care programs that are funded by federal, state and/or local funds. This includes MI Child, Michigan's CHIP funded program that serves children up to 200% of the FPL who don't otherwise qualify for Medicaid, Maternal Outpatient Medical Services (MOMS), the Breast and Cervical Cancer Prevention and Treatment Program and MI Health Link, which is Michigan's demonstration program to integrate care for people who are dually eligible for Medicare and Medicaid.

The majority of the Medicaid and CHIP program's beneficiaries receive their medical care services from capitated managed care organizations contracted with the state. Without the Medicaid and CHIP programs, medically necessary services may not be available to the eligible population.

Behavioral Health and Developmental Disabilities Administration

BHDDA is responsible for services directly provided for children and adults in 5 state hospitals; and for services delivered through a network of community based providers, in all 83 counties of Michigan. A broad continuum of community based services is available primarily through the community mental health services program and includes: Substance Abuse Prevention Treatment and Recovery services; Mental Health Promotion, Treatment and Recovery Services; services and supports for children with serious emotional disturbance and their families; and children and adults with intellectual and developmental disabilities, and children and adults with autism.